

County General Departmental Transfer Form

To: Ted Lindsey, Inventory Control Supervisor

From: _____

Re: Interdepartmental Transfer

Date: _____

| Asset # | Description | Serial# | Comments |
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Transferring Department

Receiving Department

Transferring Dept Head Signature

Receiving Dept Head Signature

By signing above you accept that the asset(s) listed will be included as part of your Department's inventory. Please submit this form to the Inventory Control Office. You may fax this form to our office at (615) 904-7526. If you have any questions please call 890-7207.